

**PART B - FEE(S) TRANSMITTAL**

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**Mail Stop ISSUE FEE**  
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22428 7590 02/24/2005

**FOLEY AND LARDNER**  
SUITE 500  
3000 K STREET NW  
WASHINGTON, DC 20007

03/21/2005 SZEWIDIE2 00000116 10022837

01 FC:1501 1400.00 OP  
02 FC:1504 300.00 OP



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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.

(Depositor's name)

(Signature)

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/022,837	12/20/2001	Russ Bown	085874-0389	1468

TITLE OF INVENTION: MULTI-FUNCTIONAL VIBRO-ACOUSTIC DEVICE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	05/24/2005
EXAMINER	ART UNIT		CLASS-SUBCLASS		
DANG, HUNG Q	2635		341-022000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  
(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Foley & Lardner LLP

2 \_\_\_\_\_

3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

New Transducers Limited

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Cambridgeshire, United Kingdom

Please check the appropriate assignee category or categories (will not be printed on the patent):  Individual  Corporation or other private group entity  Government

4a. The following fee(s) are enclosed:

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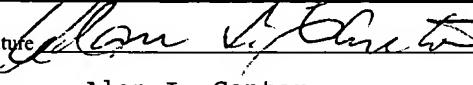
The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 19-0741 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature 

Date MAR 18 2005

Typed or printed name Alan I. Cantor

Registration No. 28,163

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